

NOTICE OF FINAL RULEMAKING

TITLE 9. HEALTH SERVICES

CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

ARIZONA LONG-TERM CARE SYSTEM

PREAMBLE

1. Sections Affected

Rulemaking Action

R9-28-501

Amend

R9-28-501.01

New Section

R9-28-503

Amend

R9-28-505

Amend

2. The specific authority for the rulemaking, including both the authorizing statute (general) and the statutes the rules are implementing (specific):

Authorizing statute: A.R.S. § 36-2932

Implementing statute: A.R.S. §§ 36-2932, 36-2939

3. The effective date of the rules:

This rulemaking will be effective 60 days from the date of filing with the Secretary of State.

4. A list of all previous notices appearing in the Register addressing the final rules:

Notice of Rulemaking Docket Opening: 14 A.A.R. 2785, July 11, 2008

Notice of Proposed Rulemaking: 14 A.A.R. 2971, August 1, 2008

5. The name and address of agency personnel with whom persons may communicate regarding the rulemaking:

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6. An explanation of the rule, including the agency's reasons for initiating the rule:

The Administration is making rule changes as a result of a 5-Year Rule-Review recently conducted. The topics requiring an update are requirements that relate to: pre-existing conditions, nursing facilities required to be registered with a program contractor, and other technical updates.

7. A reference to any study relevant to the rules that the agency reviewed and either relied on in its evaluation of or justification for the rules or did not rely on in its evaluation of or justification for the rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:

No study was reviewed during this rulemaking and the Agency does not anticipate reviewing any studies.

8. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a previous grant of authority of a political subdivision of this state:

Not applicable

9. The summary of the economic, small business, and consumer impact:

The Administration anticipates that there will be a minimal to no economic impact as a result of the rule changes. The changes provide clarification of current processes and technical updates, and therefore do not require a change in practices for those affected by the rulemaking.

10. A description of the changes between the proposed rules, including supplemental notices, and final rules (if applicable):

No substantial changes have been made between the proposed rules and the final rules below. The Administration made the rules more clear, concise, and understandable by making grammatical, verb tense, punctuation, and structural changes throughout the rules.

11. A summary of the comments made regarding the rules and the agency response to them:

The Administration did not receive any comments regarding the rules.

12. Any other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules:

Not applicable

13. Incorporations by reference and their location in the rules:

None

14. Were these rules previously adopted as emergency rules?

No

15. The full text of the rules follows:

TITLE 9. HEALTH SERVICES

CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

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ARTICLE 5. PROGRAM CONTRACTOR AND PROVIDER STANDARDS

Section

R9-28-501. Program Contractor and Provider Standards - ~~related~~ Related Definitions

R9-28-501.01. Pre-Existing Conditions

R9-28-503. Licensure and Certification for Long-term Care Institutional Facilities

R9-28-505. Standards, Licensure, and Certification for Providers of Hospital and Medical Services

ARTICLE 5. PROGRAM CONTRACTOR AND PROVIDER STANDARDS

R9-28-501. Program Contractor and Provider Standards - ~~related~~ Related Definitions

Definitions. The following words and phrases, in addition to definitions contained in A.R.S. §§ 36-2901 and 36-2931, and 9 A.A.C. 22, Article 1, have the following meanings unless the context of the Chapter explicitly requires another meaning:

- 1- "Certification" means a voluntary process by which a federal or state regulatory entity grants recognition to a person, facility, or organization that has met certain qualifications specified by the regulatory entity, allowing the person, facility, or organization to use the word "certified" in a title or designation.
- 2- "Therapeutic leave" means ~~when that~~ a member leaves an institutional facility for a period ~~of time. That time cannot~~ that does not exceed nine days per contract year.

R9-28-501.01. Pre-Existing Conditions

A program contractor shall comply with the pre-existing condition requirements in A.A.C. R9-22-502.

R9-28-503. Licensure and Certification for Long-term Care Institutional Facilities

- A. A nursing facility shall not provide services to a member; unless the facility is licensed by Arizona Department of Health Services, Medicare- and Medicaid- certified, and meets the requirements in 42 CFR 442, as of October 1, 2004, and 42 CFR 483, as of October 1, 2004, incorporated by reference, on file with the Administration, and available from the U.S. Government Printing Office, ~~Mail Stop: IDCC~~, 732 N. Capitol ~~Street St~~, NW, Washington, ~~DC D.C.~~, 20401, ~~and licensed by Arizona Department of Health Services~~. This incorporation by reference contains no future editions or amendments.
- B. An ICF-MR shall not provide services to a member unless the ICF-MR is Medicaid-certified and meets the requirements in A.R.S. § 36-2939(B)(1) and 42 CFR 442, Subpart C, as of October 1, 2004, and 42 CFR 483, as of October 1, 2004, incorporated by reference, on file with the Administration and available from the U.S. Government Printing Office, ~~Mail Stop: IDCC~~, 732 N. Capitol ~~Street St~~, NW, Washington, ~~DC D.C.~~, 20401. This incorporation by reference contains no future editions or amendments.
- C. A nursing facility or ICF-MR that provides services to a member shall register as a provider with the Administration to receive reimbursement. The Administration shall not register a provider unless the provider meets the licensure and certification requirements of ~~subsections~~ subsection (A) or (B) ~~and has a current provider agreement with a program contractor.~~

R9-28-505. Standards, Licensure, and Certification for Providers of Hospital and Medical Services

- ~~A. A provider of hospital and medical care services shall be registered with the Administration to receive reimbursement.~~
- ~~B.~~ A provider shall not provide hospital services to a member unless the hospital is licensed by the Arizona Department of Health Services, and meets the requirements in 42 CFR 441 and 482, as of October 1, 2004, and 42 CFR 456, Subpart C, as

of October 1, 2004, incorporated by reference, on file with the Administration and available from the U.S. Government Printing Office, ~~Mail Stop: IDCC~~, 732 N. Capitol ~~Street St~~, NW, Washington, ~~DC D.C.~~, 20401. This incorporation contains no future editions or amendments. An Indian Health Service (IHS) hospital and a Veterans Administration hospital shall not provide services to a member unless accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).